New Jersey Department of Health and Senior Services Bureau of Vital Statistics and Registration P. O. Box 370 Trenton, NJ 08625-0370

QUARTERLY REPORT OF BURIAL PERMITS ISSUED

NOTICE TO REGISTRAR:

The form below is to be used when forwarding Burial Permit Fees to the New Jersey Department of Health and Senior Services, Bureau of Vital Statistics and Registration, in accordance with P.L.2007,c.98 and R.S.26:6-17.

INSTRUCTIONS:

- 1. Fill in your 5-digit Vital Statistics code (V-code).
- 2. Enter the Period Ending Date. On the right side of the form, select the appropriate quarterly period to correspond to the Period Ending Date.
- 3. Enter the number of Burial Permits issued for the quarter.
- 4. Multiply the number of Burial Permits issued from Line 3 by the appropriate fee (currently \$10.00). Enter the total amount due for the quarter.
- 5 Print the name of your municipality and county.
- 6. Sign and date the form.

The reports are to be completed and submitted with your payment on a quarterly basis and must be sent within the 30-day period following the end of each quarter. If no Burial Permits were issued during the quarter, indicate "**NONE**" on Line 3 and fax the form to (609) 341-2007.

Registrar: Please complete all requested information.

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	Vital Statistics Code (V Code) (5 digits) Period Ending Date / 2 0 0 9	This report identifies the number of Burial Permit Fees issued for: Cotober-November-December, 2009 July-August-September, 2009 April-May-June, 2009 January-February-March, 2009
	Number of Burial Permits Issued	
4.	Total Amount Due\$	Make check for "Total Amount Due" payable to: "TREASURER, STATE OF NEW JERSEY"
5.	Municipality/County Name:	Mail to: NJ Department of Health and Senior Services Bureau of Vital Statistics and Registration Burial Permit Fees P. O. Box 370 Trenton, NJ 08625-0370
6.	Signature/Date:	